FORM D

UNITED STATES SI:CURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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SEC Mall Processing Section

JAN 14 2008

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Prefix							
DA	TE RECEIV	ED						

on nC	TION
Name of Offering (HESTANDET This is an amendment and name has changed, and indicate change.)	
Southwest Restaurant Constraint	
Filing Under (Check box(es) that apply): Rule 304 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing:	
A. BASIC IDENTIFICATION DATA	1 (0.17) 0.10) 0.17) 0.10) 0.17) 0.10 0.17
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment ard name has changed, and indicate change.)	08021216
Southwest Restaurant Corporation	00021210
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
25 Harvey Road, Unit 1, Bedford, NH 03110	603-606-4466
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	000 007 0000
TOE COURT TIMOW CHOOK, MICHORIOGO, THE COTORS	603-627-8600
Brief Description of Business	0
Restaurant	K 27227
	PROCESSED
Type of Business Organization	
	case specify): JAN 16 2008
business trust limited p artnership, to be formed	3/AIV - 0 ZUUU
Month Year	THOMSON
Actual or Estimated Date of Incorporation or Organizat on: 9 Actual Estim	IALE TIMANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN fo Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all in ormation requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A. BASIC IDI	ENTII	FICATION DATA				
	he issuer, if the issuer having the pow	suer has ver to ve	te or dispose, or di	rect th	e vote or disposition				s of equity securities of the issuer.
Each general and n				corpo	rate general and man	aging	partners of	partne	ership issuers; and
Check Box(es) that Apply:	Promoter	√ 1	Beneficial Owner	Ø	Executive Officer	V	Director		General and/or Managing Partner
Full Name (Last name first, it Thomas C. Boucher									
Business or Residence Addres 24 Boxwood Road, Bedfo		Street,	City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	Z	leneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, it Mark A. Fenske									
Business or Residence Addres 9 Main Street, Brookline,		Street,	City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	[] I	eneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Daniel Fraser	f individual)			•					
Business or Residence Addres 542 Corning Road, Manch			City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	Z I	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Tom Allen	f individual)								
Business or Residence Addres 2 Fuller Mill Road, Merrin	,		City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	7 [Beneficial Owner	V	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in Patrick Wesson	f individual)								
Business or Residence Addres 744 Abbot Hill Road, Wilt	•	Street,	City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	_ F	3:neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)					•			
Business or Residence Addres	ss (Number and	Street,	City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in	f individual)		_						
Business or Residence Address	ss (Number and	Street,	City, State, Zip Co	ode)					
	(Use bla	nk shee	t, or copy and use	ađditi	onal copies of this sl	heet, a	as necessary	·)	

			<u> </u>		B. I?	NFORMATI	ON ABOU	T OFFERI	NG					
1	17					1 4			shin affani	O		Yes	No	
l.	Has the	issuer soic	l, or does th			Appendix,				-	•••••			
2.	What is	the minim	um investm					_				\$ 18,750.00		
-												Yes	No	
3.													X	
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Ful	l Name (l	Last name	first, if indi	ividual)										
Bus	siness or	Residence	Address (N	lumber and	i Street, Ci	ty, State, Z	ip Code)							
Nai	me of Ass	sociated Br	oker or Dea	aler			• • •							
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit l	Purchasers							
	(Check	"All States	or check	individual	States)	•••••	***************************************					☐ AI	l States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KI NI TA	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Ful	II Name (I	Last name	first, if indi	ividual)								· •-		
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)							
Na	me of Ass	sociated Bi	roker or De	aler		,								
Sta	ites in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All States	s" or check	individual	States)							□ vi	l States	
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY N/ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Fu	ll Name (Last name	first, if ind	ividual)					<u> </u>					
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)							
Na	me of Ass	sociated B	roker or De	aler										
Sta	ites in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	-			-			
	(Check	"All State:	s" or check	individual	l States)				•••••	***************************************		☐ AI	1 States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	(C/) (KY) (N) (TY)	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MÖ PA PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "z:ro." If the transaction is an exchange offering, check		
	this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	ancady exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		s
	Equity	243,750.00	\$_243,750.00
	Common Preferred		
	Convertible Securities (including warrants)	S	<u> </u>
	Partnership Interests	S	<u> </u>
	Other (Specify)		
	Total	243,750.00	<u>\$</u> 243,750.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	9	<u>\$</u> 243,750.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.		,	
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	 	\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$ 4,000.00
	Accounting Fees	Z	\$ <u>750.00</u>
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	_	,] \$
	Other Expenses (identify)		\$
	Total		\$ 4,750.00

	C. OFFERING PRICE, NU	JMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	and total expenses furnished in response to Part C	ffering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$239,000.00
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and all of the payments listed must equal the adjusted gross Part C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[\$. S
	Purchase of real estate	[\$. 🗆 \$
	Purchase, rental or leasing and installation of and equipment	machinery [
	Construction or leasing of plant buildings and	facilities	\$. 🗆 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)			. Z \$_239,000.00
	Repayment of indebtedness			
	Working capital			. 🗆 s
	Other (specify):	[\$
			\$. 🗆 \$
	Column Totals		_ \$_0.00	239,000.00 \$ 239,000.00
	Total Payments Listed (column totals added)		□ \$ <u></u> 2:	39,000.00
		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Commis accredited investor pursuant to paragraph (b)(2) of E	sion, upon writte	ile 505, the following in request of its staff
ss	uer (Print or Type)	Signiffy ()	Date	
S	outhwest Restaurant Corporation	March HATER	January 11, 200	8
Na	me of Signer (Print or Type)	(itle de Signer (Print or Type)		
	fark A. Fenske	President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Ĺ		E. STATE SIGNATU	RE		
1.	Is any party described in 17 CFR 230.2(2 pre provisions of such rule?			Yes	No ∑
	See A	Appendix, Column 5, for st	ate response.		
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required		tor of any state in which this notice i	s filed a no	otice on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state adminis	trators, upon written request, inforn	nation furr	nished by the
4.	The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establish	ate in which this notice is fil	ed and understands that the issuer c	entitled to laiming th	the Uniform e availability
	ner has read this notification and knows the conte thorized person.	nts to be true and has duly ca	used this notice to be signed on its be	half by the	undersigned
`	Print or Type) West Restaurant Corporation	SIGNATICE DE LA COMPANION DE L	Mall Date January	11, 2	008
Name (Print or Type)	Title (Print or Type)	, 9	•	
Mar	k A. Fenske	President			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and amount purchased in State offering price explanation of to non-accredited offered in state waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes No State Yes No **Investors** Amount Investors Amount ALΑK ΑZ ARCA CO CT DE DC FL GA HI ID ΙL IN IΑ KS ΚY LA ME MD 2 \$56,250.00 0 \$0.00 Common Stock MA ΜĬ MN MS

APPENDIX 2 4 l 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors **Investors** Yes No Amount Amount MQ MT NE NV Common Stock NH 6 \$168,750.0d o \$0.00 × × \$168,750.00 Common Stock NJ X 1 \$18,750.00 0 \$0.00 × NM NY NC ND OH OK OR PA RI SC SD TN TXŲT VT VAWAWVWI

	APPENDIX											
1		2	3		4							
	Type of security and aggregate to non-accredited investors in State (Part B-Item 1) Type of security and aggregate Offering price Offered in state (Part C-Item 1) Type of security and aggregate Type of investor and amount purchased in State (Part C-Item 2)							Disqualification under State ULC (if yes, attach explanation of waiver granted (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

END